



ANNUAL STATEMENT
FOR THE YEAR ENDING DECEMBER 31, 2006
OF THE CONDITION AND AFFAIRS OF THE

Physicians Health Plan of Mid-Michigan - FamilyCare

NAIC Group Code 3408 (Current Period), 3408 (Prior Period) NAIC Company Code 11537 Employer's ID Number 364497604

Organized under the Laws of Michigan, State of Domicile or Port of Entry Michigan

Country of Domicile US

Licensed as business type:
Life Accident and Health [], Dental Service Corporation [], Health Maintenance Organization [X] Property/Casualty [], Vision Service Corporation [], Is HMO Federally Qualified? Yes () No (X) Hospital, Medical and Dental Service or Indemnity [], Other []

Incorporated/Organized May 23, 2002 Commenced Business January 1, 2003

Statutory Home Office 1400 E. Michigan Avenue, Lansing, Michigan 48912 (Street and Number, City or Town, State and Zip Code)

Main Administrative Office 1400 E. Michigan Avenue, Lansing, Michigan 48912 (Street and Number, City or Town, State and Zip Code) 517-364-8400 (Area Code) (Telephone Number)

Mail Address PO Box 30377, Lansing, Michigan 48909 (Street and Number, City or Town, State and Zip Code)

Primary Location of Books and Records 1400 E. Michigan, Lansing, Michigan 48912 (Street and Number, City or Town, State and Zip Code) 517-364-8400 (Area Code) (Telephone Number)

Internet Website Address www.phpmm.org

Statutory Statement Contact Jackie Eddy (Name) 517-364-8400 (Area Code) (Telephone Number) (Extension) jackie.eddy@phpmm.org (E-Mail Address) 517-364-8407 (Fax Number)

Policyowners Relations Contact and Phone Number 1400 E. Michigan Avenue, Lansing, Michigan 48912 (Street and Number, City or Town, State and Zip Code) 517-364-8400 (Area Code) (Telephone Number) (Extension)

OFFICERS

1. Scott Wilkerson# (President)
3. Randy Rifkin (Secretary)
2. Chris Bergman# (Treasurer)
4. David Vis# (Assistant Secretary)

OTHER OFFICERS

DIRECTORS OR TRUSTEES

Scott Wilkerson#
Marylee Davis, PhD
Ronae Hammond

State of Michigan }
County of Ingham } SS

The officers of this reporting entity, being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively.

Scott Wilkerson# President Chris Bergman# Treasurer David Vis# Assistant Secretary

Subscribed and sworn to before me this day of
a. Is this an original filing? Yes (X) No ()
b. If no: 1. State the amendment number 0
2. Date filed
3. Number of pages attached 0

EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

1	2	3	4	5	6	7
Name of Debtor	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	Admitted
0499999 - Premiums due and unpaid from Medicaid entities	11,582	76,732	56,463	0	0	144,778
0599999 - Accident and health premiums due and unpaid (Page 2, Line 13).....	11,582	76,732	56,463	0	0	144,778

EXHIBIT 3 - HEALTH CARE RECEIVABLES

1	2	3	4	5	6	7
Name of Debtor	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	Admitted
Pharmaceutical Rebate Receivables						
United Health Care-Pharmacy Rebates	237,567	0	0	0	0	99,884
Merk Medco-Pharmacy Rebates	99,884	0	0	0	0	237,567
0199999 - Pharmaceutical Rebate Receivables	337,451	0	0	0	0	337,451
Other Receivables						
Data Bank-Psychotropic	90,400	90,400	93,138	0	0	273,938
Stae of MI-Maternity Case Rate	(22,946)	0	0	0	0	(22,946)
.....	0	0	0	0	0	0
0699999 - Other Receivables	67,454	90,400	93,138	0	0	250,992
0799999 - Gross Health Care Receivables	404,905	90,400	93,138	0	0	588,443

EXHIBIT 4 - CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims

1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
0399999 - Aggregate accounts not individually listed-covered	942,882	27,149	54,298	14,701	66,321	1,105,351
0499999 - Subtotals	942,882	27,149	54,298	14,701	66,321	1,105,351
0599999 - Unreported claims and other claim reserves						4,563,118
0799999 - Total claims unpaid						4,563,118
0899999 - Accrued medical incentive pool and bonus amounts						180,025

EXHIBIT 5 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

1 Name of Affiliate	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	Admitted	
						7 Current	8 Non-Current
Individually listed receivables							
Physicians Health Network - InterCompany	53,078	0	0	0	0	53,078	0
Physicians Health Plan Mid-Michigan	258,140	0	0	0	0	258,140	0
0199999 - Subtotal - Individually listed receivables	311,218	0	0	0	0	311,218	0
0399999 - TOTAL gross amounts receivable	311,218	0	0	0	0	311,218	0

EXHIBIT 6 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES

1	2	3	4	5
Affiliate	Description	Amount	Current	Non-Current
Individually listed payables				
Physicians Health Plan Mid Michigan	Inter Company payables	861,886	861,886	0
Physicians Health Network	Inter Company payables	217,197	217,197	0
0199999 - Subtotal - Individually listed payables		1,079,083	1,079,083	0
0399999 - TOTAL gross payables		1,079,083	1,079,083	0

ANNUAL STATEMENT FOR THE YEAR 2006 OF THE Physicians Health Plan of Mid-Michigan - FamilyCare

EXHIBIT 7 - PART 1 - SUMMARY OF TRANSACTIONS WITH PROVIDERS

Payment Method	1 Direct Medical Expense Payment	2 Column 1 as a Percentage of of Total Payments	3 Total Members Covered	4 Column 3 as a Percentage of Total Members	5 Column 1 Expenses Paid to Affiliated Providers	6 Column 1 Expenses Paid to Non-Affiliated Providers
Capitation Payments:						
1. Medical groups	0	0.000	16,515	100.000	0	0
2. Intermediaries	503,136	1.673	0	0.000	0	503,136
3. All other providers	0	0.000	0	0.000	0	0
4. Total capitation payments	503,136	1.673	16,515	100.000	0	503,136
Other Payments:						
5. Fee-for-service	2,011,023	6.686	X X X	X X X	0	2,011,023
6. Contractual fee payments	27,562,839	91.641	X X X	X X X	12,678,906	14,883,933
7. Bonus/withhold arrangements - fee-for-service	0	0.000	X X X	X X X	0	0
8. Bonus/withhold arrangements - contractual fee payments	0	0.000	X X X	X X X	0	0
9. Non-contingent salaries	0	0.000	X X X	X X X	0	0
10. Aggregate cost arrangements	0	0.000	X X X	X X X	0	0
11. All other payments	0	0.000	X X X	X X X	0	0
12. Total other payments	29,573,862	98.327	X X X	X X X	12,678,906	16,894,956
13. Total (Line 4 plus Line 12)	30,076,998	100%	X X X	X X X	12,678,906	17,398,092

EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

1 NAIC Code	2 Name of Intermediary	3 Capitation Paid	4 Average Monthly Capitation	5 Intermediary's Total Adjusted Capital	6 Intermediary's Authorized Control Level RBC
Transactions with intermediaries					
.....	United Behavior Health	483,010	40,251	0	0
.....	United Resource Network	20,126	1,677	0	0
9999999 - TOTAL Transactions with intermediaries		503,136			

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Exhibit 8, Furniture and Equipment and Supplies Owned

NONE



ANNUAL STATEMENT FOR THE YEAR 2006 OF THE Physicians Health Plan of Mid-Michigan - FamilyCare

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

REPORT FOR: 1. CORPORATION Physicians Health Plan of Mid-Michigan FamilyCare

2. Lansing, MI

(LOCATION)

NAIC Group Code: 3408

NAIC Company Code: 11537

BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAR 2006

	1	Comprehensive (Hospital and Medical)		4	5	6	7	8	9	10	11	12	13
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Stop Loss	Disability Income	Long-Term Care	Other
Total Members at end of:													
1. Prior Year	20,277	0	0	0	0	0	0	0	20,277	0	0	0	0
2. First Quarter	16,739	0	0	0	0	0	0	0	16,739	0	0	0	0
3. Second Quarter	16,552	0	0	0	0	0	0	0	16,552	0	0	0	0
4. Third Quarter	16,727	0	0	0	0	0	0	0	16,727	0	0	0	0
5. Current Year	16,515	0	0	0	0	0	0	0	16,515	0	0	0	0
6. Current Year Member Months	212,075	0	0	0	0	0	0	0	212,075	0	0	0	0
Total Member Ambulatory Encounters for Year:													
7. Physician	139,853	0	0	0	0	0	0	0	139,853	0	0	0	0
8. Non-Physician	68,883	0	0	0	0	0	0	0	68,883	0	0	0	0
9. Total	208,736	0	0	0	0	0	0	0	208,736	0	0	0	0
10. Hospital Patient Days Incurred	8,634	0	0	0	0	0	0	0	8,634	0	0	0	0
11. Number of Inpatient Admissions	2,358	0	0	0	0	0	0	0	2,358	0	0	0	0
12. Health Premiums Written	35,879,838	0	0	0	0	0	0	0	35,879,838	0	0	0	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	35,879,838	0	0	0	0	0	0	0	35,879,838	0	0	0	0
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	30,076,997	0	0	0	0	0	0	0	30,076,997	0	0	0	0
18. Amount Incurred for Provision of Health Care Services	31,057,691	0	0	0	0	0	0	0	31,057,691	0	0	0	0

(a) For health business: number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0 .



ANNUAL STATEMENT FOR THE YEAR 2006 OF THE Physicians Health Plan of Mid-Michigan - FamilyCare

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

REPORT FOR: 1. CORPORATION

2.

(LOCATION)

NAIC Group Code: 3408

NAIC Company Code: 11537

BUSINESS IN THE STATE OF GRAND TOTAL DURING THE YEAR 2006

	1	Comprehensive (Hospital and Medical)		4	5	6	7	8	9	10	11	12	13
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Stop Loss	Disability Income	Long-Term Care	Other
Total Members at end of:													
1. Prior Year	20,277	0	0	0	0	0	0	0	20,277	0	0	0	0
2. First Quarter	16,739	0	0	0	0	0	0	0	16,739	0	0	0	0
3. Second Quarter	16,552	0	0	0	0	0	0	0	16,552	0	0	0	0
4. Third Quarter	16,727	0	0	0	0	0	0	0	16,727	0	0	0	0
5. Current Year	16,515	0	0	0	0	0	0	0	16,515	0	0	0	0
6. Current Year Member Months	212,075	0	0	0	0	0	0	0	212,075	0	0	0	0
Total Member Ambulatory Encounters for Year:													
7. Physician	139,853	0	0	0	0	0	0	0	139,853	0	0	0	0
8. Non-Physician	68,883	0	0	0	0	0	0	0	68,883	0	0	0	0
9. Total	208,736	0	0	0	0	0	0	0	208,736	0	0	0	0
10. Hospital Patient Days Incurred	8,634	0	0	0	0	0	0	0	8,634	0	0	0	0
11. Number of Inpatient Admissions	2,358	0	0	0	0	0	0	0	2,358	0	0	0	0
12. Health Premiums Written	35,879,838	0	0	0	0	0	0	0	35,879,838	0	0	0	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	35,879,838	0	0	0	0	0	0	0	35,879,838	0	0	0	0
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	30,076,997	0	0	0	0	0	0	0	30,076,997	0	0	0	0
18. Amount Incurred for Provision of Health Care Services	31,057,891	0	0	0	0	0	0	0	31,057,891	0	0	0	0

(a) For health business: number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0 .

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Schedule A, Verification Between Years
NONE

Schedule B, Verification Between Years
NONE

Schedule BA, Verification Between Years
NONE

SCHEDULE D - PART 1A - SECTION 1

Quality and Maturity Distribution of All Bonds Owned December 31 , at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

Quality Rating per the NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total from Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
1. U.S. Governments, Schedules D and DA (Group 1)											
1.1 Class 1	0	0	0	0	0	0	0.0	0	0.0	0	0
1.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	0
1.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	0
1.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	0
1.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	0
1.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
1.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
2. All Other Governments, Schedules D and DA (Group 2)											
2.1 Class 1	0	0	0	0	0	0	0.0	0	0.0	0	0
2.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	0
2.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	0
2.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	0
2.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	0
2.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
2.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
3. States, Territories and Possessions etc. , Guaranteed, Schedules D and DA (Group 3)	NONE										
3.1 Class 1						0	0.0	0	0.0	0	0
3.2 Class 2						0	0.0	0	0.0	0	0
3.3 Class 3						0	0.0	0	0.0	0	0
3.4 Class 4						0	0.0	0	0.0	0	0
3.5 Class 5						0	0.0	0	0.0	0	0
3.6 Class 6						0	0.0	0	0.0	0	0
3.7 Totals						0	0.0	0	0.0	0	0
4. Political Subdivisions of States, Territories and Possessions, Guaranteed, Schedules D and DA (Group 4)											
4.1 Class 1	0	0	0	0	0	0	0.0	0	0.0	0	0
4.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	0
4.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	0
4.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	0
4.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	0
4.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
4.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
5. Special Revenue and Special Assessment Obligations etc. , Non-Guaranteed, Schedules D and DA (Group 5)											
5.1 Class 1	0	0	0	0	0	0	0.0	0	0.0	0	0
5.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	0
5.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	0
5.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	0
5.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	0
5.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
5.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

SCHEDULE D - PART 1A - SECTION 1 (continued)

Quality and Maturity Distribution of All Bonds Owned December 31 , at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

Quality Rating per the NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total from Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
6. Public Utilities (Unaffiliated) , Schedules D and DA (Group 6)											
6.1 Class 1	0	0	0	0	0	0	0.0	0	0.0	0	0
6.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	0
6.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	0
6.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	0
6.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	0
6.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
6.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
7. Industrial and Miscellaneous (Unaffiliated) , Schedules D and DA (Group 7)											
7.1 Class 1	8,284,991	0	0	0	0	8,284,991	100.0	7,158,494	0.0	8,284,991	0
7.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	0
7.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	0
7.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	0
7.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	0
7.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
7.7 Totals	8,284,991	0	0	0	0	8,284,991	100.0	7,158,494	0.0	8,284,991	0
8. Credit Tenant Loans , Schedules D and DA (Group 8)											
8.1 Class 1	0	0	0	0	0	0	0.0	0	0.0	0	0
8.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	0
8.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	0
8.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	0
8.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	0
8.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
8.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
9. Parent, Subsidiaries and Affiliates, Schedules D and DA (Group 9)											
9.1 Class 1	0	0	0	0	0	0	0.0	0	0.0	0	0
9.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	0
9.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	0
9.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	0
9.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	0
9.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
9.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

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SCHEDULE D - PART 1A - SECTION 1 (continued)

Quality and Maturity Distribution of All Bonds Owned December 31 , at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

	1	2	3	4	5	6	7	8	9	10	11
Quality Rating per the NAIC Designation	1 Year or Less	Over 1 Year Through 5 Years	Over 5 Years Through 10 Years	Over 10 Years Through 20 Years	Over 20 Years	Total Current Year	Column 6 as a % of Line 10. 7	Total from Column 6 Prior Year	% From Column 7 Prior Year	Total Publicly Traded	Total Privately Placed (a)
10. Total Bonds Current Year											
10.1 Class 1	8,284,991	0	0	0	0	8,284,991	100.0	X X X	X X X	8,284,991	0
10.2 Class 2	0	0	0	0	0	0	0.0	X X X	X X X	0	0
10.3 Class 3	0	0	0	0	0	0	0.0	X X X	X X X	0	0
10.4 Class 4	0	0	0	0	0	0	0.0	X X X	X X X	0	0
10.5 Class 5	0	0	0	0	0	(c) 0	0.0	X X X	X X X	0	0
10.6 Class 6	0	0	0	0	0	(c) 0	0.0	X X X	X X X	0	0
10.7 Totals	8,284,991	0	0	0	0	(b) 8,284,991	100.0	X X X	X X X	8,284,991	0
10.8 Line 10.7 as a % of Column 6	100.0	0.0	0.0	0.0	0.0	100.0	X X X	X X X	X X X	100.0	0.0
11. Total Bonds Prior Year											
11.1 Class 1	7,158,494	0	0	0	0	X X X	X X X	7,158,494	100.0	7,158,494	0
11.2 Class 2	0	0	0	0	0	X X X	X X X	0	0.0	0	0
11.3 Class 3	0	0	0	0	0	X X X	X X X	0	0.0	0	0
11.4 Class 4	0	0	0	0	0	X X X	X X X	0	0.0	0	0
11.5 Class 5	0	0	0	0	0	X X X	X X X	(c) 0	0.0	0	0
11.6 Class 6	0	0	0	0	0	X X X	X X X	(c) 0	0.0	0	0
11.7 Totals	7,158,494	0	0	0	0	X X X	X X X	(b) 7,158,494	100.0	7,158,494	0
11.8 Line 11.7 as a % of Column 8	100.0	0.0	0.0	0.0	0.0	X X X	X X X	100.0	X X X	100.0	0.0
12. Total Publicly Traded Bonds											
12.1 Class 1	8,284,991	0	0	0	0	8,284,991	100.0	7,158,494	100.0	8,284,991	X X X
12.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	X X X
12.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	X X X
12.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	X X X
12.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	X X X
12.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	X X X
12.7 Totals	8,284,991	0	0	0	0	8,284,991	100.0	7,158,494	100.0	8,284,991	X X X
12.8 Line 12.7 as a % of Column 6	100.0	0.0	0.0	0.0	0.0	100.0	X X X	X X X	X X X	100.0	X X X
12.9 Line 12.7 as a % of Line 10.7, Column 6, Section 10	100.0	0.0	0.0	0.0	0.0	100.0	X X X	X X X	X X X	100.0	X X X
13. Total Privately Placed Bonds											
13.1 Class 1	0	0	0	0	0	0	0.0	0	0.0	X X X	0
13.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	X X X	0
13.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	X X X	0
13.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	X X X	0
13.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	X X X	0
13.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	X X X	0
13.7 Totals	0	0	0	0	0	0	0.0	0	0.0	X X X	0
13.8 Line 13.7 as a % of Column 6	0.0	0.0	0.0	0.0	0.0	0.0	X X X	X X X	X X X	X X X	0.0
13.9 Line 13.7 as a % of Line 10.7, Column 6, Section 10	0.0	0.0	0.0	0.0	0.0	0.0	X X X	X X X	X X X	X X X	0.0

(a) Includes \$ 0 freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.
(b) Includes \$ 0 current year, \$ 0 prior year of bonds with Z designations and \$ 0 current year, \$ 0 prior year of bonds with Z* designations. The letter "Z" means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement. "Z*" means the SVO could not evaluate the obligation because valuation procedures for the security class is under regulatory review.
(c) Includes \$ 0 current year, \$ 0 prior year of bonds with 5* designations and \$ 0 current year, \$ 0 prior year of bonds with 6* designations. "5*" means the NAIC designation was assigned by the SVO in reliance on the insurer's certification that the issuer is current in all principal and interest payments. "6*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.

SCHEDULE D - PART 1A - SECTION 2

Maturity Distribution of All Bonds Owned December 31 , At Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total From Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
1. U.S. Governments, Schedules D and DA (Group 1)											
1.1 Issuer Obligations	0	0	0	0	0	0	0.0	0	0.0	0	0
1.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
1.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
2. All Other Governments, Schedules D and DA (Group 2)											
2.1 Issuer Obligations	0	0	0	0	0	0	0.0	0	0.0	0	0
2.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
2.3 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
2.4 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
2.5 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
2.6 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
2.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
3. States, Territories and Possessions, Guaranteed, Schedules D and DA (Group 3)											
3.1 Issuer Obligations	0	0	0	0	0	0	0.0	0	0.0	0	0
3.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
3.3 Defined					0	0	0.0	0	0.0	0	0
3.4 Other					0	0	0.0	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
3.5 Defined					0	0	0.0	0	0.0	0	0
3.6 Other					0	0	0.0	0	0.0	0	0
3.7 Totals					0	0	0.0	0	0.0	0	0
4. Political Subdivisions of States, Territories and Possessions, Guaranteed, Schedules D and DA (Group 4)											
4.1 Issuer Obligations					0	0	0.0	0	0.0	0	0
4.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
4.3 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
4.4 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
4.5 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
4.6 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
4.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
5. Special Revenue and Special Assessment Obligations etc. , Non-Guaranteed, Schedules D and DA (Group 5)											
5.1 Issuer Obligations	0	0	0	0	0	0	0.0	0	0.0	0	0
5.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
5.3 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
5.4 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
5.5 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
5.6 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
5.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

NONE

SCHEDULE D - PART 1A - SECTION 2 (continued)

Maturity Distribution of All Bonds Owned December 31 , At Book /Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10. 7	8 Total From Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
6. Public Utilities (Unaffiliated) , Schedules D and DA (Group 6)											
6.1 Issuer Obligations	0	0	0	0	0	0	0.0	0	0.0	0	0
6.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
6.3 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
6.4 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
6.5 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
6.6 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
6.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
7. Industrial and Miscellaneous (Unaffiliated) , Schedules D and DA (Group 7)											
7.1 Issuer Obligations	8,284,991	0	0	0	0	8,284,991	100.0	7,158,494	0.0	8,284,991	0
7.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
7.3 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
7.4 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
7.5 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
7.6 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
7.7 Totals	8,284,991	0	0	0	0	8,284,991	100.0	7,158,494	0.0	8,284,991	0
8. Credit Tenant Loans, Schedules D and DA (Group 8)											
8.1 Issuer Obligations	0	0	0	0	0	0	0.0	0	0.0	0	0
8.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
9. Parent, Subsidiaries and Affiliates , Schedules D and DA (Group 9)											
9.1 Issuer Obligations	0	0	0	0	0	0	0.0	0	0.0	0	0
9.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
9.3 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
9.4 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
9.5 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
9.6 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
9.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

SCHEDULE D - PART 1A - SECTION 2 (continued)

Maturity Distribution of All Bonds Owned December 31 , At Book /Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total From Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
10. Total Bonds Current Year											
10.1 Issuer Obligations	8,284,991	0	0	0	0	8,284,991	100.0	X X X	X X X	8,284,991	0
10.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	0	0.0	X X X	X X X	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
10.3 Defined	0	0	0	0	0	0	0.0	X X X	X X X	0	0
10.4 Other	0	0	0	0	0	0	0.0	X X X	X X X	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
10.5 Defined	0	0	0	0	0	0	0.0	X X X	X X X	0	0
10.6 Other	0	0	0	0	0	0	0.0	X X X	X X X	0	0
10.7 Totals	8,284,991	0	0	0	0	8,284,991	100.0	X X X	X X X	8,284,991	0
10.8 Line 10.7 as a % of Column 6	100.0	0.0	0.0	0.0	0.0	100.0	X X X	X X X	X X X	100.0	0.0
11. Total Bonds Prior Year											
11.1 Issuer Obligations	7,158,494	0	0	0	0	X X X	X X X	7,158,494	100.0	7,158,494	0
11.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	X X X	X X X	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
11.3 Defined	0	0	0	0	0	X X X	X X X	0	0.0	0	0
11.4 Other	0	0	0	0	0	X X X	X X X	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
11.5 Defined	0	0	0	0	0	X X X	X X X	0	0.0	0	0
11.6 Other	0	0	0	0	0	X X X	X X X	0	0.0	0	0
11.7 Totals	7,158,494	0	0	0	0	X X X	X X X	7,158,494	100.0	7,158,494	0
11.8 Line 11.7 as a % of Column 8	100.0	0.0	0.0	0.0	0.0	X X X	X X X	0.0	X X X	100.0	0.0
12. Total Publicly Traded Bonds											
12.1 Issuer Obligations	8,284,991	0	0	0	0	8,284,991	100.0	7,158,494	100.0	8,284,991	X X X
12.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	X X X
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
12.3 Defined	0	0	0	0	0	0	0.0	0	0.0	0	X X X
12.4 Other	0	0	0	0	0	0	0.0	0	0.0	0	X X X
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
12.5 Defined	0	0	0	0	0	0	0.0	0	0.0	0	X X X
12.6 Other	0	0	0	0	0	0	0.0	0	0.0	0	X X X
12.7 Totals	8,284,991	0	0	0	0	8,284,991	100.0	7,158,494	100.0	8,284,991	X X X
12.8 Line 12.7 as a % of Column 6	100.0	0.0	0.0	0.0	0.0	100.0	X X X	X X X	X X X	100.0	X X X
12.9 Line 12.7 as a % of Line 10.7, Column 6, Section 10	100.0	0.0	0.0	0.0	0.0	100.0	X X X	X X X	X X X	100.0	X X X
13. Total Privately Placed Bonds											
13.1 Issuer Obligations	0	0	0	0	0	0	0.0	0	0.0	X X X	0
13.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	X X X	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
13.3 Defined	0	0	0	0	0	0	0.0	0	0.0	X X X	0
13.4 Other	0	0	0	0	0	0	0.0	0	0.0	X X X	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
13.5 Defined	0	0	0	0	0	0	0.0	0	0.0	X X X	0
13.6 Other	0	0	0	0	0	0	0.0	0	0.0	X X X	0
13.7 Totals	0	0	0	0	0	0	0.0	0	0.0	X X X	0
13.8 Line 13.7 as a % of Column 6	0.0	0.0	0.0	0.0	0.0	0.0	X X X	X X X	X X X	X X X	0.0
13.9 Line 13.7 as a % of Line 10.7, Column 6, Section 10	0.0	0.0	0.0	0.0	0.0	0.0	X X X	X X X	X X X	X X X	0.0

SCHEDULE DA - PART 2 - VERIFICATION BETWEEN YEARS

Short-Term Investments

	1	2	3	4	5
	Total	Bonds	Mortgage Loans	Other Short-term Investment Assets (a)	Investments in Parent Subsidiaries and Affiliates
1. Book/adjusted carrying value, December 31 of prior year	7,158,494	7,158,494	0	0	0
2. Cost of short-term investments acquired	36,556,691	36,556,691	0	0	0
3. Increase (decrease) by adjustment	0	0	0	0	0
4. Increase (decrease) by foreign exchange adjustment	0	0	0	0	0
5. Total profit (loss) on disposal of short-term investments	0	0	0	0	0
6. Consideration received on disposal of short-term investments	35,430,194	35,430,194	0	0	0
7. Book/adjusted carrying value, current year	8,284,991	8,284,991	0	0	0
8. Total valuation allowance	0	0	0	0	0
9. Subtotal (Line 7 plus Line 8)	8,284,991	8,284,991	0	0	0
10. Total nonadmitted amounts	0	0	0	0	0
11. Statement value (Line 9 minus Line 10)	8,284,991	8,284,991	0	0	0
12. Income collected during year	0	0	0	0	0
13. Income earned during year	0	0	0	0	0

(a) Indicate the category of such assets, for example, joint ventures, transportation equipment:

Page 40

Schedule DB, Part A, Verification Between Years
NONE

Schedule DB, Part B, Verification Between Years
NONE

Page 41

Schedule DB, Part C, Verification Between Years
NONE

Schedule DB, Part D, Verification Between Years
NONE

Schedule DB, Part E, Verification of Statement and Fair Values
NONE

Page 42

Schedule DB, Pt. F, Section 1, Replicated (Synthetic) Assets Open
NONE

Page 43

Sch. DB, Pt. F, Sn. 2, Reconciliation Replicated (Syn.) Assets
NONE

Page 44

Sch. S, Pt. 1, Sn. 2 Reinsurance Assumed Accident and Health
NONE

Page 45

Sch. S, Pt. 2, Reinsurance Recoverable on Paid and Unpaid Losses
NONE

SCHEDULE S - PART 3 - SECTION 2

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31 , Current Year

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Company	5 Location	6 Type	7 Premiums	8 Unearned Premiums (estimated)	9 Reserve Credit Taken Other than for Unearned Premiums	Outstanding Surplus Relief		12 Modified Coinsurance Reserve	13 Funds Withheld Under Coinsurance
									10 Current Year	11 Prior Year		
Authorized General Account, Non-Affiliates												
67105	41-0451140	01/01/2006	Reliastar Life Insurance Company	Minneapolis, MN	SSL/L/G	139,410	0	0	0	0	0	0
0299999 - Authorized General Account, Non-Affiliates						139,410	0	0	0	0	0	0
0399999 - Total Authorized General Account						139,410	0	0	0	0	0	0
0799999 - Total Authorized and Unauthorized General Account						139,410	0	0	0	0	0	0
1599999 - GRAND TOTAL						139,410	0	0	0	0	0	0

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Sch. S, Pt. 4, Reinsurance Ceded to Unauthorized Companies

NONE

SCHEDULES S - PART 5

Five-Year Exhibit of Reinsurance Ceded Business
(000 Omitted)

	1 2006	2 2005	3 2004	4 2003	5 2002
A. OPERATIONS ITEMS					
1. Premiums	0	0	0	0	0
2. Title XVIII - Medicare	0	0	0	0	0
3. Title XIX - Medicaid	139	173	168	149	0
4. Commissions and reinsurance expense allowance	0	0	0	0	0
5. Total hospital and medical expenses	0	0	0	0	0
B. BALANCE SHEET ITEMS					
6. Premiums receivable	0	0	0	0	0
7. Claims payable	0	0	0	0	0
8. Reinsurance recoverable on paid losses	0	0	50	12	0
9. Experience rating refunds due or unpaid	0	0	25	35	0
10. Commissions and reinsurance expense allowances unpaid	0	0	0	0	0
11. Unauthorized reinsurance offset	0	0	0	0	0
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
12. Funds deposited by and withheld from (F)	0	0	0	0	0
13. Letters of credit (L)	0	0	0	0	0
14. Trust agreements (T)	0	0	0	0	0
15. Other (O)	0	0	0	0	0

SCHEDULE S - PART 6

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
ASSETS (Page 2, Column 3)			
1. Cash and invested assets (Line 10)	12,264,115	0	12,264,115
2. Accident and health premiums due and unpaid (Line 13)	144,778	0	144,778
3. Amounts recoverable from reinsurers (Line 14.1)	0	0	0
4. Net credit for ceded reinsurance	X X X	0	0
5. All other admitted assets (Balance)	889,401	0	889,401
6. Total assets (Line 26)	13,298,294	0	13,298,294
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7. Claims unpaid (Line 1)	5,668,470	0	5,668,470
8. Accrued medical incentive pool and bonus payments (Line 2)	180,025	0	180,025
9. Premiums received in advance (Line 8)	0	0	0
10. Reinsurance in unauthorized companies (Line 18)	0	0	0
11. All other liabilities (Balance)	1,345,378	0	1,345,378
12. Total liabilities (Line 22)	7,193,873	0	7,193,873
13. Total capital and surplus (Line 31)	6,104,421	X X X	6,104,421
14. Total liabilities, capital and surplus (Line 32)	13,298,294	0	13,298,294
NET CREDIT FOR CEDED REINSURANCE			
15. Claims unpaid	0		
16. Accrued medical incentive pool	0		
17. Premiums received in advance	0		
18. Reinsurance recoverable on paid losses	0		
19. Other ceded reinsurance recoverables	0		
20. Total ceded reinsurance recoverables	0		
21. Premiums receivable	0		
22. Unauthorized reinsurance	0		
23. Other ceded reinsurance payables/offsets	0		
24. Total ceded reinsurance payables/offsets	0		
25. Total net credit for ceded reinsurance	0		

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Sch. T, Part 2, Interstate Compact Products

NONE

SCHEDULE Y

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
.	38-1360584	Sparrow Health System	6,000,000	0	0	0	10,112,360	0		0	16,112,360	0
95849	38-2356288	Physicians Health Plan of Mid-Michigan	(3,000,000)	(9,150,000)	0	0	(218,901,412)	0		0	(231,051,412)	0
	38-3361367	PHP Shared Services L.L.C.	0	650,000	0	0	8,044,520	0		0	8,694,520	0
11537	38-4497604	Physicians Health Plan Mid-Michigan - FC	0	0	0	0	(34,169,572)	0		0	(34,169,572)	0
	38-3344741	Physicians Health Plan Mid-Michigan-TPA	0	0	0	0	(103,922)	0		0	(103,922)	0
	38-2594856	Physicians Health Network	(3,000,000)	0	0	0	235,208,234	0		0	232,208,234	0
12816	20-5565219	PHPM Insurance Company	0	8,500,000	0	0	(190,208)	0		0	8,309,792	0
9999999 - CONTROL TOTALS			0	0	0	0	0	0		0	0	0

If the nature of the transactions reported in Part 2 requires explanation, report such in the following explanatory note:

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SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a NONE report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING	RESPONSE
1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
EXPLANATION:	
BARCODE: Document Identifier 460:	
2. Will an actuarial opinion be filed by March 1?	YES
EXPLANATION:	
BARCODE: Document Identifier 440:	
3. Will the Risk-based Capital Report be filed with the NAIC by March 1?	YES
EXPLANATION:	
BARCODE: Document Identifier 390:	
4. Will the Risk-based Capital Report be filed with the state of domicile, if required by March 1?	YES
EXPLANATION:	
BARCODE: Document Identifier 390:	
APRIL FILING	
5. Will Management's Discussion and Analysis be filed by April 1?	YES
EXPLANATION:	
BARCODE: Document Identifier 350:	
6. Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
EXPLANATION:	
BARCODE: Document Identifier 285:	
7. Will the Accident and Health Policy Experience Exhibit be filed by April 1?	YES
EXPLANATION:	
BARCODE: Document Identifier 210:	
JUNE FILING	
8. Will an audited financial report be filed by June 1?	YES
EXPLANATION:	
BARCODE: Document Identifier 220:	

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a NONE report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING	RESPONSE
9. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	YES
EXPLANATION:	
BARCODE:	
Document Identifier 360:	
10. Will the Supplemental Life data due March 1 be filed with the state of domicile and the NAIC?	NO
EXPLANATION:	
BARCODE:	
Document Identifier 205:	1 1 5 3 7 2 0 0 6 2 0 5 0 0 0 0 0
11. Will the Supplemental Property/Casualty data due March 1 be filed with the state of domicile and the NAIC?	NO
EXPLANATION:	
BARCODE:	
Document Identifier 207:	1 1 5 3 7 2 0 0 6 2 0 7 0 0 0 0 0
12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	YES
EXPLANATION:	
BARCODE:	
Document Identifier 420:	
13. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	YES
EXPLANATION:	
BARCODE:	
Document Identifier 365:	
APRIL FILING	
14. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile by April 1?	NO
EXPLANATION:	
BARCODE:	
Document Identifier 330:	1 1 5 3 7 2 0 0 6 3 3 0 0 0 0 0 0
15. Will the Supplemental Life data due April 1 be filed with the state of domicile and the NAIC?	NO
EXPLANATION:	
BARCODE:	
Document Identifier 211:	1 1 5 3 7 2 0 0 6 2 1 1 0 0 0 0 0
16. Will the Supplemental Property/Casualty Insurance Expense Exhibit due April 1 be filed with any state that requires it, and, if so, the NAIC?	NO
EXPLANATION:	
BARCODE:	
Document Identifier 213:	1 1 5 3 7 2 0 0 6 2 1 3 0 0 0 0 0



MEDICARE PART D COVERAGE SUPPLEMENT
For the Year Ended December 31, 2006
(To be Filed by March 1)

	1	2	3	4	5
	Individual Coverage		Group Coverage		Total
	Insured	Uninsured	Insured	Uninsured	Cash
1. Premiums Collected					
1.1 Standard Coverage					
1.11 With Reinsurance Coverage	0	XXX	0	XXX	0
1.12 Without Reinsurance Coverage	0	XXX	0	XXX	0
1.13 Risk-Corridor Payment Adjustments	0	XXX	0	XXX	0
1.2 Supplemental Benefits	0	XXX	0	XXX	0
2. Premiums Due and Uncollected - change					
2.1 Standard Coverage					
2.11 With Reinsurance Coverage	0	XXX	0	XXX	XXX
2.12 Without Reinsurance Coverage	0	XXX	0	XXX	XXX
2.2 Supplemental Benefits	0	XXX	0	XXX	XXX
3. Unearned Premium and Advance Premium - change					
3.1 Standard Coverage					
3.11 With Reinsurance Coverage	0	XXX	0	XXX	XXX
3.12 Without Reinsurance Coverage	0	XXX	0	XXX	XXX
3.2 Supplemental Benefits	0	XXX	0	XXX	XXX
4. Risk-Corridor Payment Adjustments - change					
4.1 Receivable	0	XXX	0	XXX	XXX
4.2 Payable	0	XXX	0	XXX	XXX
5. Earned Premiums					
5.1 Standard Coverage					
5.11 With Reinsurance Coverage	0	XXX	0	XXX	XXX
5.12 Without Reinsurance Coverage	0	XXX	0	XXX	XXX
5.13 Risk-Corridor Payment Adjustments	0	XXX	0	XXX	XXX
5.2 Supplemental Benefits	0	XXX	0	XXX	XXX
6. Total Premiums	0	XXX	0	XXX	0
7. Claims Paid					
7.1 Standard Coverage					
7.11 With Reinsurance Coverage			0	XXX	0
7.12 Without Reinsurance Coverage			0	XXX	0
7.2 Supplemental Benefits			0	XXX	0
8. Claim Reserves and Liabilities - change					
8.1 Standard Coverage					
8.11 With Reinsurance Coverage			0	XXX	XXX
8.12 Without Reinsurance Coverage	0	XXX	0	XXX	XXX
8.2 Supplemental Benefits	0	XXX	0	XXX	XXX
9. Healthcare Receivables - change					
9.1 Standard Coverage					
9.11 With Reinsurance Coverage	0	XXX	0	XXX	XXX
9.12 Without Reinsurance Coverage	0	XXX	0	XXX	XXX
9.2 Supplemental Benefits	0	XXX	0	XXX	XXX
10. Claims Incurred					
10.1 Standard Coverage					
10.11 With Reinsurance Coverage	0	XXX	0	XXX	XXX
10.12 Without Reinsurance Coverage	0	XXX	0	XXX	XXX
10.2 Supplemental Benefits	0	XXX	0	XXX	XXX
11. Total Claims	0	XXX	0	XXX	0
12. Reinsurance Coverage and Low Income Cost Sharing					
12.1 Claims Paid - net to reimbursements applied	XXX	0	XXX	0	0
12.2 Reimbursements Received but Not Applied - change	XXX	0	XXX	0	0
12.3 Reimbursements Receivable - change	XXX	0	XXX	0	XXX
12.4 Healthcare Receivables - change	XXX	0	XXX	0	XXX
13. Aggregate Policy Reserves - change	0	0	0	0	XXX
14. Expenses Paid	0	XXX	0	XXX	0
15. Expenses Incurred	0	XXX	0	XXX	XXX
16. Underwriting Gain/Loss	0	XXX	0	XXX	XXX
17. Cash Flow Results	XXX	XXX	XXX	XXX	0

NONE